Case 16-31933-SLM Doc 129 Filed 08/16/21 Entered 08/16/21 13:50:42 Desc Main Document Page 1 of 8

Fill in this info	ill in this information to identify your case:					
Debtor 1	Michael Agyemar	Michael Agyeman				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		DISTRICT OF NEW JERSEY				
Case number	16-31933					

■ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

info	es complete and accurate as possible. If two married people are filing together, both are equally responsible formation. Fill out all of your schedules first; then complete the information on this form. If you are filing amendor original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	t 1: Summarize Your Assets		
		Your as	sets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	34,267.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	34,267.00
Par	t 2: Summarize Your Liabilities		
		Your lia Amount	bilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	25,747.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	22,000.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	4,192.00
	Your total liabilities	\$	51,939.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,719.18
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,080.17
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	edules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debtor 1 Michael Agyeman Case number (if known) 16-31933

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____8,077.67

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	22,000.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	2,023.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	24,023.00

Fill in this information	on to identify your case:	
Debtor 1	Michael Agyeman	
Debtor 2 (Spouse, if filing)		
United States Bank	ruptcy Court for the: DISTRICT OF NEW JERSEY	
_	16-31933	Check if this is:
(If known)		An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official For	<u>m 106l</u>	MM / DD/ YYYY

Schedule I: Your Income

12/15

For Debtor 2 or

For Debtor 1

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Describe Employment				
1.	Fill in your employment information.		Debto	r 1	Debtor 2 or non-filing spouse
	If you have more than one job,	Empleyment status	■ Em	ployed	■ Employed
	attach a separate page with information about additional	Employment status	□ No	t employed	☐ Not employed
	employers.	Occupation	Ins. A	Agent, Taxes, Notary, Airli	Housekeeping
	Include part-time, seasonal, or self-employed work.	Employer's name	Kwal	naze Multiple Services	Memphis Shared Services
	Occupation may include student or homemaker, if it applies.	Employer's address		yons Avenue gton, NJ 07111	755 Crossover Lane Memphis, TN 38117
		How long employed to	here?	Twelve Years	Several Years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 0.00 \$ 5,658.73

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

4. \$ 0.00 \$ 5,658.73

Official Form 106l Schedule I: Your Income page 1

Deb	otor 1	Michael Agyeman	_	C	Case number (if know	vn) .	16-31933		
	Cop	by line 4 here	4.		For Debtor 1	00	For Debto		_
5.	List	all payroll deductions:				_			_
٥.	5a.	Tax, Medicare, and Social Security deductions	5a		\$ 0.0	١٨	\$	1,151.97	,
	5b.	Mandatory contributions for retirement plans	5b		\$ 0.0		\$	0.00	_
	5c.	Voluntary contributions for retirement plans	5c		\$ 0.0		·	1,120.38	_
	5d.	Required repayments of retirement fund loans	5d	l.	\$ 0.0		\$	0.00	_
	5e.	Insurance	5e	٠.	\$ 0.0	00	\$	0.00)
	5f.	Domestic support obligations	5f.		\$ 0.0		\$	0.00	_
	5g.	Union dues	5g		\$ 0.0		\$	119.30	_
	5h.	Other deductions. Specify: NYC Defense Fund	_ 5h	.+	. —		+ \$	8.67	_
		Meal Allowance	_		\$0.0		\$	56.90	_
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$0.0			2,457.22	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$0.0)0_	\$	3,201.51	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a		\$ 2,517.6	37	\$	0.00	
	8b.	Interest and dividends	8b		\$ 0.0		\$	0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$ 0.0		\$	0.00	_
	8d.	Unemployment compensation	8d		\$ 0.0	_	\$	0.00	
	8e.	Social Security	8e	٠.	\$ 0.0		\$	0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.		\$ 0.0	00	\$	0.00)
	8g.	Pension or retirement income	8g		\$0.0		\$	0.00	_
	8h.	Other monthly income. Specify:	8h	.+	\$0.0	00 +	+ \$	0.00	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,517.6	37	\$	0.0	0
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	2,517.67 +	\$	3,201.5	1 = \$	5,719.18
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		*-	2,017.01	•	<u> </u>	<u>-</u>	3,7 13.10
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe				ed in <i>Schedi</i>	ule J. . +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certailies						. \$	5,719.18
								Combi	ned ly income
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?					month	iy income
		Yes. Explain:							

Official Form 106l Schedule I: Your Income page 2

Fill	in this information to	identify vo	ur case:					
						Check	c if this is:	
Den	IVIIC	hael Agy	eman				An amended filing	
Deb	tor 2						ū	ving postpetition chapter
	ouse, if filing)							the following date:
Unit	ed States Bankruptcy	Court for the:	DISTRI	CT OF NEW JERSEY			MM / DD / YYYY	
Cas	e number 16-319	33						
(If kı	nown)							
Of	fficial Form	106J						
	chedule J:		Exner	1888				12/15
Be	as complete and a	ccurate as pace is ne	possible eded, atta	. If two married people ar ich another sheet to this				or supplying correct
Par 1.	t 1: Describe Y Is this a joint cas		hold					
	■ No. Go to line 2							
	☐ Yes. Does De k		n a separ	ate household?				
	□ No		-					
	☐ Yes. De	ebtor 2 mus	t file Offic	al Form 106J-2, Expenses	s for Separate House	hold of Debto	or 2.	
2.	Do you have dep	endents?	□ No					
	Do not list Debtor Debtor 2.	1 and	Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state the							□ No
	dependents name	s.			Son		6 Years	■ Yes
								□ No
					Son		12 Years	Yes
					Com		4.4 V	□ No
					Son		14 Years	■ Yes
					Son		17 Years	□ No ■ Yes
3.	Do your expense	s include		No				- res
	expenses of peop		nan _	Yes				
	yourself and you	r aepenaei	nts? —	100				
Est exp		es as of yo	our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp				
• •		d 6 a a 241			f lun av			
the	value of such assi			government assistance i cluded it on <i>Schedule I:</i>			Your expe	ansas
(On	ficial Form 106l.)						Tour expe	
4.	The rental or hon payments and any			ses for your residence. I or lot.	nclude first mortgage	4. \$		1,273.00
	If not included in	line 4:						
	4a. Real estate	taxes				4a. \$		0.00
	4b. Property, ho	meowner's		's insurance		4b. \$		38.00
				upkeep expenses		4c. \$		80.00
_				dominium dues	ma aguitu la ana	4d. \$		0.00
5.	Additional mortg	age payme	ents for yo	our residence , such as ho	rne equity loans	5. \$		0.00

Deb	tor 1	Michael	Agyeman	Case number (if	known)	16-31933
6.	Utilit	ies:				
	6a.	Electricity	y, heat, natural gas	6a. \$		300.00
	6b.	Water, se	ewer, garbage collection	6b. \$		0.00
	6c.	Telephon	ne, cell phone, Internet, satellite, and cable services	6c. \$		270.00
	6d.	Other. Sp	pecify:	6d. \$		0.00
7.	Food	and hous	sekeeping supplies	7. \$		1,150.00
8.	Child	dcare and	children's education costs	8. \$		0.00
9.	Cloth	hing, laund	dry, and dry cleaning	9. \$		250.00
10.	Pers	onal care	products and services	10. \$		180.00
11.	Medi	ical and de	ental expenses	11. \$		250.00
12.	Tran	sportation	Include gas, maintenance, bus or train fare.	_		
			car payments.	12. \$		500.00
13.	Ente	rtainment	, clubs, recreation, newspapers, magazines, and books	13. \$		250.00
14.	Char	ritable con	tributions and religious donations	14. \$		225.00
15.	Insu	rance.				
			insurance deducted from your pay or included in lines 4 or 20.			
		Life insur		15a. \$		0.00
		Health in		15b. \$		0.00
		Vehicle in		15c. \$		228.00
			surance. Specify:	15d. \$		0.00
16.			nclude taxes deducted from your pay or included in lines 4 or 2			
			me Tax Liability	16. \$ _		86.17
17.			lease payments:	47- 0		
			nents for Vehicle 1	17a. \$		0.00
			nents for Vehicle 2	17b. \$		0.00
		Other. Sp		17c. \$		0.00
		Other. Sp	•	17d. \$ _		0.00
18.			s of alimony, maintenance, and support that you did not rep			0.00
10			nyour pay on line 5, Schedule I, Your Income (Official Form ts you make to support others who do not live with you.	1061).		0.00
19.	Spec		is you make to support others who do not live with you.	ν 19.		0.00
20.		,	perty expenses not included in lines 4 or 5 of this form or o		como	
20.			es on other property	20a. \$	Joine.	0.00
		Real esta		20b. \$		0.00
			homeowner's, or renter's insurance	20c. \$ _		0.00
			ince, repair, and upkeep expenses	20d. \$ _		0.00
			ner's association or condominium dues	20d. \$ 20e. \$		
04						0.00
21.	Otne	er: Specify:		21. +\$		0.00
22.	Calc	ulate your	monthly expenses			
	22a.	Add lines 4	4 through 21.	\$		5,080.17
	22b.	Copy line 2	22 (monthly expenses for Debtor 2), if any, from Official Form 10	06J-2 \$ ⁻		•
	22c	Add line 22	2a and 22b. The result is your monthly expenses.	\$		5,080.17
						<u> </u>
23.			monthly net income.			
			e 12 (your combined monthly income) from Schedule I.	23a. \$		5,719.18
	23b.	Сору уог	ur monthly expenses from line 22c above.	23b\$ _		5,080.17
	23c.		your monthly expenses from your monthly income.	220 \$		639.01
		The resu	It is your monthly net income.	23c. \$		033.01
24	Do v	OII EXPECT	an increase or decrease in your expenses within the year	after you file this form	2	
∠→.	•	•	ou expect to finish paying for your car loan within the year or do you exp	•		ase or decrease because of a
			e terms of your mortgage?	,		
	■ N	0.				
	□ Ye		Explain here:			
		- J.				

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In re	Michael Agyeman		Case No.	16-31933	
		Debtor(s)			

SCHEDULE J - YOUR EXPENSES Attachment A

Budget Notes:

- 1. I am living with the mother of my four minor children, though we are not legally married.
- 2. I do not have any regular medical insurance. The children are covered by their mother.
- 3. I previously had a child support obligation, for a son who is now an adult and does not live with me. Although my child support payments have ceased, there is a dispute with the mother as to an alleged arrearage. The mother alleges that I have an outstanding balance of \$38,000, but I am contesting this amount. If I am found responsible for the arrears, I would have to start paying it back.

Fill in this infor				
Debtor 1	Michael Agyemar	1		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number	16-31933			
(if known)				■ Check if this is an
				amended filing
				amonaca ming

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below		
Di	d you pay or agree to pay someone who is NOT	n attorney to help you fill out bankruptcy forms	s?
	No		
	Yes. Name of person		Bankruptcy Petition Preparer's Notice, ation, and Signature (Official Form 119)
	der penalty of perjury, I declare that I have read to they are true and correct. /s/ Michael Agyeman	x	aration and
	Michael Agyeman Signature of Debtor 1	Signature of Debtor 2	
	Date August 16, 2021	Date	